

**REMARKS**

The Applicant thanks the Examiner for the thorough consideration given the present application. Claims 1-11 are pending. Claims 1, 2, 5, 8, and 11 are amended. Claims 1 and 2 are independent. The Examiner is respectfully requested to reconsider the rejections in view of the amendments and remarks set forth herein.

**Reasons for Entry of Amendments**

At the outset, it is respectfully requested that this Amendment be entered into the Official File in view of the fact that the amendments to the claims automatically place the application in condition for allowance.

In the alternative, if the Examiner does not agree that this application is in condition for allowance, it is respectfully requested that this Amendment be entered for the purpose of appeal. This Amendment was not presented at an earlier date in view of the fact that the Examiner has just now presented new grounds for rejection in this Final Office Action.

**Foreign Priority Claim**

It is gratefully appreciated that the Examiner has acknowledged the Applicants' claim for foreign priority.

**Drawings**

It is gratefully appreciated that the Examiner has accepted the drawings.

**Rejections Under 35 U.S.C. § 112, second paragraph**

Claims 5, 8, and 11 stand rejected under 35 U.S.C. § 112, second paragraph as being indefinite. This rejection is respectfully traversed.

In order to overcome this rejection, the Applicants have amended claims 5, 8, and 11 to correct the deficiencies pointed out by the Examiner. The Applicants respectfully submit that the claims, as amended, particularly point out and distinctly claim the subject matter which Applicants regard as the invention. Accordingly, reconsideration and withdrawal of this rejection are respectfully requested.

**Rejections Under 35 U.S.C. § 102(e) and § 103(a)**

Claims 1-5 stand rejected under 35 U.S.C. § 102(e) as being anticipated by Jackson (U.S. 2004/0078220); and claims 6-11 stand rejected under 35 U.S.C. § 103(a) as being unpatentable over Jackson in view of Bayne (U.S. 2005/0060198). These rejections are respectfully traversed.

Complete discussions of the Examiner's rejections are set forth in the Office Action, and are not being repeated here.

**Amendments to Independent Claims 1 and 2**

While not conceding the appropriateness of the Examiner's rejection, but merely to advance prosecution of the instant application, independent claim 1 has been amended to

recite a combination of elements in a medical diagnostic system for prevention and early identification of diseases in healthy persons, including *inter alia*

at least one user terminal located in a home or office and operated by a user;

at least one physician terminal located in a hospital or clinic and operated by a physician; and

center equipment located in a medical center for receiving and processing the medical information sent from said user terminal and said physician terminal;

said user terminal including:

detecting units for detecting biological information of a user in the form of electric signals,

a monitoring unit for displaying circumstances of detection including biological information detected by said detecting units,

a user terminal communication unit for sending the user's medical information including the detected biological information to said center equipment, and for receiving the medical information from the center equipment;

said center equipment including:

a first data storage unit for storing medical treatment information about a plurality of users and information about a plurality of physicians,

a data-analyzing unit for analyzing said user's medical information sent by said user's terminal to produce a diagnostic result,

a second data storage unit for storing doctor's questions selectable according to the analyzed result,

a data extracting unit for reading selected ones of the doctor's questions from said second data storage unit, and for selecting at least one physician among said plurality of physicians stored in said first data storage unit,

a medical center communications unit linked to said user terminal and/or said physician terminal to send said medical information including said diagnostic result and said selected ones of the doctor's questions; and

a control unit for controlling said analyzing unit, first data storage unit, second data storage unit, and data extracting unit;

said physician terminal including:

a physician communication unit for receiving said user's medical information sent from said center equipment, and also for sending said user's medical information of the physician side to said center equipment,

wherein said center equipment is so configured that the control unit of said center equipment, when receiving the biological information of the user sent from the user terminal, allows the analyzing unit to analyze the biological information of the user with reference to medical treatment information stored in the first data storage unit to determine the health condition of the user classified into at least three categories, including:

- (a) not particular,
- (b) abnormal but no need for emergency care, and
- (c) abnormal and need for emergency care;

wherein said control unit allows said center equipment to send results analyzed by said analyzing unit to the user terminal, and

when the health condition of the user is classified into category (b), the control unit allows the data extracting unit to select or read out the doctor's questions appropriate to the health condition of the user, and allows said center equipment to send the selected questionnaires to the user terminal together with the analyzed result of said analyzing unit to request the user to complete the questionnaires on a screen of the user terminal.

Further, independent claim 2 has been amended to recite a combination of steps in a diagnostic processing method for prevention and early identification of diseases in healthy persons, including *inter alia*

a diagnostic processing method for preventing and early identification of diseases in healthy persons, comprising the steps of:

detecting biological information including blood pressure, a heart rate, body temperature and weight of a user, with biological information detecting units connected to a user terminal;

allowing the user to manually write medical information which is unable to be detected by the biological information detecting unit;

repeating the detection of the biological information until the biological information of the user is completed;

sending the completed biological information and manually written medical information from the user terminal to a center equipment through the communication network;

allowing the center equipment to analyze said biological information and medical information of the user sent from the user terminal;

determining the health condition of the user based on said biological information of the user, said manually written medical information and stored medical information, thereby classifying the health condition of the user into three categories:

- (a) not particular,
- (b) abnormal but no need for emergency care, and
- (c) abnormal and need for emergency care;

selecting doctor's questions for the user who has been determined as being abnormal but who has no need for emergency care, based on said biological information and medical information of the user; and

sending the analyzed result and the selected doctor's questions to the user terminal through the communication unit.

Applicants respectfully submit that the combination of element/steps as set forth in each of independent claims 1 and 2 is not disclosed or made obvious by the prior art of record, including Jackson.

As can be seen from the revised independent claim 1, the present invention has been defined as a medical diagnosis system for prevention and early identification of diseases in healthy persons and is characterized by the facts that the center equipment is so configured that the control unit of said center equipment, when receiving the biological information of the user sent from the user terminal, allows the analyzing unit to analyze the biological information of the user with reference to medical treatment information stored in the first data-storing unit to determine the health condition of the user classified into three categories: (a) not particular, (b) abnormal but no need for emergency care, and (c) abnormal and need for emergency care; that said control unit allows said center equipment to send results analyzed by said analyzing unit to the user terminal, and that if the health conditions of the user is classified into category (b), the control unit allows the data extracting unit to select or read out doctor's questions appropriate to the health condition of the user from the second data base according to the biological information of the user, and allows said center equipment to send the selected questionnaires to the user terminal together with the analyzed result of said analyzing unit to request the user to complete questionnaires on a screen of the user terminal.

Independent claim 2 has been revised in a similar manner.

In contrast to the invention set forth in independent claims 1 and 2, Jackson merely discloses a health care system including a hosted environment (4, 6) that provides health care treatment, diagnosis, and/or management, health care providers (2a-2g) linked to one another and to a central network, which is linked to patient (3a, 3b) via the hosted environment, the patient (3a, 3b) which interfaces with the hosted environment (4, 6), which provides the global access to the health care provider (2a-2g). The patient may also have medical devices (7) that facilitate collection of vital sign data (e.g., digital thermometer) and administration of treatment (e.g., medicine dispensary). The health care provider (2a-2g) can license the hosted environment (4, 6) to generate the treatment tree and perform the treatment.

However, the system of Jackson is directed to a system for providing health care treatment to a patient from a health care provider, and teaches or suggests nothing about a medical diagnosis system for prevention and early identification of diseases in healthy persons and features of independent claims 1 and 2 of the present invention. It is therefore believed that the present invention is never obvious from Jackson.

At least for the reasons explained above, the Applicants respectfully submit that the combination of elements/steps set forth in each of independent claims 1 and 2 is not disclosed or made obvious by the prior art of record, including Jackson. Accordingly, reconsideration and withdrawal of this rejection are respectfully requested.

Independent claims 1 and 2 are now in condition for allowance.



**Dependent Claims**

Dependent claims 5, 8, and 11 have been amended.

All dependent claims are in condition for allowance due to their dependency from allowable independent claims, or due to the additional novel features set forth therein.

All claims of the present application are now in condition for allowance.

**CONCLUSION**

Since the remaining patents cited by the Examiner have not been utilized to reject claims, but merely to show the state of the art, no comment need be made with respect thereto.

All of the stated grounds of rejection have been properly traversed, accommodated, or rendered moot. It is believed that a full and complete response has been made to the outstanding Office Action, and that the present application is in condition for allowance.

If the Examiner believes, for any reason, that personal communication will expedite prosecution of this application, he is invited to telephone Carl T. Thomsen (Reg. No. 50,786) at (703) 205-4030 (direct line).

Pursuant to the provisions of 37 C.F.R. §§ 1.17 and 1.136(a), the Applicants hereby petition for an extension of three (3) months of July 18, 2006 in which to file a reply to the Office Action. The required fee of \$1,020.00 is enclosed herewith.

*Application No. 09/982,010*  
*Amendment dated October 17, 2006*  
*Reply to Office Action of April 18, 2006*

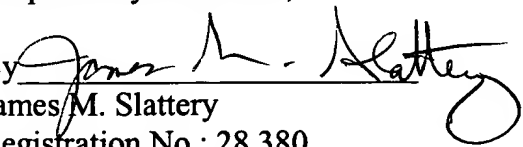
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*Art Unit: 3626*  
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If necessary, the Commissioner is hereby authorized in this, concurrent, and future replies to charge payment or credit any overpayment to Deposit Account No. 02-2448 for any additional fees required under 37 C.F.R. §§ 1.16 or 1.17, particularly extension of time fees.

**October 17, 2006**

JMS/CTT/af 

Respectfully submitted,

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